

NANCY L. JOHNSON, CONNECTICUT, CHAIRMAN
SUBCOMMITTEE ON HEALTH

JIM MCCRERY, LOUISIANA
PHILIP M. CRANE, ILLINOIS
SAM JOHNSON, TEXAS
DAVE CAMP, MICHIGAN
JIM RAMSTAD, MINNESOTA
PHILIP S. ENGLISH, PENNSYLVANIA
JENNIFER DUNN, WASHINGTON

FORTNEY PETE STARK, CALIFORNIA
GERALD D. KLECZKA, WISCONSIN
JOHN LEWIS, GEORGIA
JIM McDERMOTT, WASHINGTON
KAREN THURMAN, FLORIDA

EX OFFICIO:
BILL THOMAS, CALIFORNIA
CHARLES B. RANGEL, NEW YORK

BILL THOMAS, CALIFORNIA, CHAIRMAN
COMMITTEE ON WAYS AND MEANS

ALLISON H. GILES, CHIEF OF STAFF
JOHN E. McMANUS, SUBCOMMITTEE STAFF DIRECTOR

JANICE MAYS, MINORITY CHIEF COUNSEL
CYBELE BJORKLUND, SUBCOMMITTEE MINORITY

Congress of the United States
House of Representatives
COMMITTEE ON WAYS AND MEANS

WASHINGTON, DC 20515

SUBCOMMITTEE ON HEALTH

November 4, 2002

President George W. Bush
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Dear President Bush:

The Institute of Medicine (IOM) recently released the third report in its Quality Chasm Series, "Leadership by Example: Coordinating Government Roles in Improving Health Care Quality." The report calls for the federal government to establish and apply standardized performance measures across federal health programs in order to vastly improve the quality of health care in this country. I urge you to implement these recommendations as quickly as possible.

The need for improving health care quality cannot be overstated. The IOM has previously estimated that as many as 98,000 people die each year in hospitals as a result of medical errors. Preventable medication errors alone result in an additional \$2 billion in hospital spending each year. Congress will hopefully pass legislation to help reduce medical errors in the near future, but our bill establishes a voluntary structure. Nothing in it requires the private sector to submit data or adopt recognized practices to reduce errors. So, even if the legislation is enacted, much more can and must be done. The federal government, as provider or payer of over half of all health care services in this country, must lead the effort. This new IOM report provides a template for such action.

The IOM recommends that federal agencies work together to require the collection and analysis of specified health care data that would be used to improve quality. Specifically, the IOM recommends directing the Quality Interagency Coordination (QuIC) Task Force to identify standardized performance measure sets for five priority areas in FY 2003 and an additional ten priority areas in FY 2004. All providers that participate in federal health programs – including Medicare, Medicaid, the Children's Health Insurance Program, the Department of Defense TRICARE and TRICARE for Life programs, the Veterans Health Administration, and the Indian Health Service – would be required to submit uniform performance data beginning in FY 2007. Comprehensive comparative quality reports should be issued beginning in FY 2008. The IOM also recommends that the federal government invest in applied health care quality research and develop a national health information infrastructure.

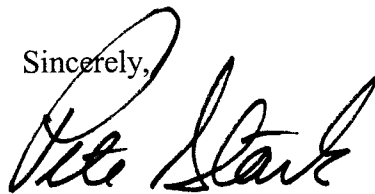
President George W. Bush
November 4, 2002
Page 2

Your administration has already taken significant steps to address health care quality concerns. For example, I applaud the Department of Health and Human Service's efforts to implement performance measurements for nursing homes, hospitals, and other providers through the Medicare Quality Measurement Program. The IOM report offers a blueprint to build on these efforts and fully realize the federal government's unique role and responsibility in improving health care quality.

I believe you have the legal authority to carry out the IOM recommendations fully and immediately. However, should you determine that you need additional legislative authority to make these vital improvements, I am ready to assist you in the legislative process. In addition, I recognize that the IOM does not assess the costs of implementing these recommendations and that additional resources will certainly be required. I hope that your forthcoming budget addresses this by including the resources needed to begin a dramatic national campaign to improve health care quality. If more is needed, I am optimistic that we can find bipartisan support to do so in Congress.

Again, I urge you to move swiftly to implement these important IOM recommendations. I look forward to hearing what steps you plan to take in this regard.

Sincerely,

A handwritten signature in black ink, appearing to read "Pete Stark", written in a cursive style.

Pete Stark
Member of Congress